



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of : **Confirmation No. 4043**  
Terumoto AKATSUKA : Docket No. 2001\_1189A  
Serial No. 09/936,322 : Group Art Unit 2817  
Filed January 14, 2002 : Examiner Arnold M. Kinhead

MULTI-BAND VOLTAGE-CONTROLLED  
OSCILLATOR

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**AMENDMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

THE COMMISSIONER IS AUTHORIZED  
TO CHARGE ANY DEFICIENCY IN THE  
FEES FOR THIS PAPER TO DEPOSIT  
ACCOUNT NO. 23-0975

Sir:

In response to the Office Action of September 29, 2003, please amend the above-identified  
U.S. Patent application as follows:

12/18/2003 CNSUYEN 00000112 09936322

01 FC:1202

108.00 OP



2817\$  
Image

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**PATENT OFFICE FEE TRANSMITTAL FORM**

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P.O. Box 1450  
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THE COMMISSIONER IS AUTHORIZED  
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FEES FOR THIS PAPER TO DEPOSIT  
ACCOUNT NO. 23-0975

Sir:

Attached hereto is a check in the amount of \$108.00 to cover Patent Office fees relating to filing the following attached papers:

Additional Claims Fee Transmittal Letter

Excess of Twenty ..... \$108.00

A duplicate copy of this paper is being submitted for use in the Accounting Division, Office of Finance.

*The Commissioner is authorized to charge any deficiency or to credit any overpayment associated with this communication to Deposit Account No. 23-0975, with the EXCEPTION of deficiencies in fees for multiple dependent claims in new applications.*

Respectfully submitted,

Terumoto AKATSUKA

By David M. Ovedovitz  
David M. Ovedovitz  
Registration No. 45,336  
Attorney for Applicant

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December 17, 2003

[Check No. 59268]

2001\_1189A



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**ADDITIONAL CLAIMS FEE TRANSMITTAL LETTER**

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FEES FOR THIS PAPER TO DEPOSIT  
ACCOUNT NO. 23-0975

Sir:

Transmitted herewith is an Amendment in the above-identified application. Additional fees required as a result of this Amendment are calculated as follows:

	SMALL ENTITY		LARGE ENTITY
Total Claims exceeding 20 (not already paid for): 6 x	(\$ 9 = \$)	or	(\$18 = \$108.00)
Indep. Claims exceeding 3 (not already paid for): x	(\$43 = \$)	or	(\$86 = \$)
<input type="checkbox"/> Multiple Dep. Claim(s) (if there previously were none): +	(\$145 = \$)	or	(\$290 = \$)
Total Additional Fee =	<u>\$</u>	or	<u>\$108.00</u>

☐ Small entity status of this application is established by the verified statement under 37 C.F.R. 1.9 and 1.27 which  
☐ is enclosed or  
☐ has been previously submitted.

☒ A check in the amount of \$108.00 is enclosed.

- [] Please charge Deposit Account No. 23-0975 the amount of \$ to cover additional fee. The Commissioner is authorized to charge any deficiency associated with this communication or to credit any overpayment to the Deposit Account. The original and two copies of this document are enclosed.

Respectfully submitted,

Terumoto AKATSUKA

By David M. Ovedovitz  
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